STATE OF SOUTH DAKOTA
Statement of Legal Newspaper Ownership and Circulation

Return to: Secretary of State, 500 E. Capitol, Pierre, SD 57501-5077

1. TITLE OF NEWSPAPER South Dakota Mail		2. DATE 9/10/14
3. FREQUENCY OF ISSUE weekly	3A. NO. OF ISSUES PUBLISHED ANNUALLY 52	3B. ANNUAL SUBSCRIPTION $40 PRICE $39 in-state out
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers) PO Box 367 -- Plankinton, SD 57368-0367		
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers) same as above		
6. FULL NAME OF PUBLISHER: John Paul Studeny, Jr. & Gayle A. Van Genderen		
7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given.		
FULL NAME: Same as above	COMPLETE MAILING ADDRESS: Same as above	
8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form. N/A		

9. EXTENT AND NATURE OF CIRCULATION	AVERAGE NO. COPIES EACH ISSUED PRECEDING 12 MONTHS	ACTUAL NO. COPIES ISSUED NEAREST TO FILING DATE
A. TOTAL NO. COPIES (Net Press Run)	975	975
B. PAID AND/OR REQUESTED CIRCULATION 1. Sales through dealers and carriers, street vendors, counter sales, and paid electronic copies.	30	35
2. Mail Subscription (Paid and or requested)	900	892
C. TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1 and 9B2)	930	927
D. FREE DISTRIBUTION 1. BY MAIL, CARRIER OR OTHER MEANS	0	0
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES	0	0
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	930	927
F. COPIES NOT DISTRIBUTED 1. Office use, left over, unaccounted, spoiled after printing	45	48
2. Return from News Agents	0	0
G. TOTAL (Sum of E, F1 and F2 – Should equal net press run shown in A)	975	975

Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public

I swear that the statements made by me are true, correct, and complete:

(Signature)

Co-Owner/Co-Publisher
(Title)

State of South Dakota)

County of South Dakota) §

Sworn to before me this 19th day of December, 2014

Pamela M Viesia
Notary Public

My commission expires: 9-5-2016

(Seal)

Pamela M. Viesia
Aurora County, SD
My Commission Expires, September 5, 2016

Form: SOS REC 051 8/2014